FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

2774 S OCEAN BLVD

CORPORATION ANNUAL REPORT

1998

Principal Place of Business 2774 S OCEAN BLVD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000084789 (5)

BABETTE RENTAL & LEASING COMPANY

PALM BCH FL 33480 US		PALM BEACH FL 33480 US				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
		· •	····			12/06/1993	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For	
21		26			· · · · · · · · · · · · · · · · · · ·	65-0460984 Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stato		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	- Ζ φ	\vdash	untry		8. This corporation owes or has paid the current year Intangible	
24	25	[29]	30	т—		Personal Property Tax due June 30. 🗷 Yes 🗌 No	
	9. Name and Address of Currer	it Hegistered Agent		61	Name	10. Name and Address of New Registered Agent	
	NTMIRE, DONALD F			1"1	Name		
265 SUNRISE AVENUE SUITE 204				82 Street Addr		Address (P.O. Box Number is Not Acceptable)	
				83			
PA	LM BEACH FL 33408						
				B4	City	FL 85 Zip Code	
-44 6				ш		corporation submits this statement for the purpose of changing its registered	
SIGNATURE	m familiar with, and accept the obligi					required when reinstating) DATE	
12,	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Р	DELETE		ITLE	-T	Change Additio	
NAME	ROSENBERG, BABETTE H		1.2	AME	1		
STREET ADDRESS	2774 S OCEAN BLVD 701		1.3 5	TREET	ADORESS		
CITY-ST-ZIP	PALM BCH FL		1.4 0	HY-S	- ZIP		
TITLE	T	DELETE	2.1 7	2.1 TITLE		Change Additio	
NAME	ROSENBERG, BENEADICT L		2.2 1	AME			
STREET ADDRESS	2774 S OCEAN BLVD 701		238	TREET	ADORESS		
CITY-ST-ZIP	PALM BCH FL	· · · · · · · · · · · · · · · · · · ·		CHTY-S	T-ZIF		
TITLE		☐ DELETE	317		ļ	Change Additio	
name	! 		3.2 N		_		
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP		DELETE	_	CITY-S	T-ZIP	Change Addition	
TITLE		ביין מנרכונ	4.1 1		1	Li cuange [1] Addition	
NAME STREET ADDRESS				NAME	ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.1 T	HTY - ST	- ZIP	☐ Change ☐ Additio	
NAME			5.2 N		j	Orango reduite	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP				ITY - ST			
TITLE		DELFTE	611		- ZIF	Change Addition	
NAME			6.2 N				
STREET ADDRESS					ADDRESS		
J			■ 535		2011200		

SIGNATURE:

2/9/98

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the composition or the recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an algebringal with an address. 561-588-2092

FILED

Feb 13 1998 8:00am

Secretary of State